STATE TAX COMMISSION OF MISSOURI

P.O. BOX 146 JEFFERSON CITY, MO 65102-0146

email: OriginalAssessment@stc.mo.gov www.stc.mo.gov (573) 751-2414 **FORM 50**

Private Car Company

TAX YEAR:	2016		Aggre	gate S	Statement of '	Taxable Property
						Account Number
Company Information					□ NEW FILER	Account Number
Company Name:						
1. Address:						
2. Address:						
City, State Zip Code:						
Contact:						
Title:						
Phone:						
Fax:						
email:						
Notification / Correspondence	(if different fro	n Company	Information)			
Name:						
1. Address:						
2. Address:						
City, State Zip Code:						
Phone / Fax:						
email:				•		
Billing Information	(if different fro	n Company	Information and Notifica	tion / Cor	respondence)	
Name:						
1. Address:						
2. Address:						
City, State Zip Code:						
Type of Business / Industry						
Telephone / Telecommunications	Electric Uti	lit.	Natural Gas Pipeline		Airline	
X Private Car Company	Railroad	uy	Product Pipeline			ial Aircraft
Type of Ownership						
Sole Proprietorship	Partnership		Domestic Corporation		Subsidiar	v
Other	Cooperative		Foreign Corporation		Parent co	
Description of Organization's Activities	(include comi	os rondono	d products sold ato	١٠		
(Attach additional sheets if needed)	(menade servic	- Hannere	a, products som, etc.,	/·		

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